STATE OF CALIFORNIA

BILINGUAL PAY AUTHORIZATION

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			EFFECTIVE DATE		
1. DEPARTMENT	2. POSITION N	NUMBER			
	Agency Cod	le Unit Code	Class Code	Serial	
2. EMPLOYEE NAME (Last Name)	(First Name)				(M. I.)
	5 SOCIAL SEC	CURITY NUMBER			
4. CLASS TITLE (For reclassification, enter new class)	3 GOOIAE GEG	ONT I NOWIDER			
BILINGUAL JUSTIFIC	CATION				
A bilingual position requires the use of a bilingual skill 10 percent of the time in must be in a setting where there is a demonstration of client or correspondence may be used to meet the needs of the public in a direct public contact position; needs; or performing interpretation, translation, or other specialized bilingual ta are available in the Bilingual Pay Manual available from the Department of Peremployuee using the four-place language codes listed below.	e flow showing or a hospital o ssks for the dep	that bilingual ski or institution settir partment and its c	lls are clearly nee ng dealing with pat lients. More detail	ded. The skills tient or inmate ed instructions	
Language Code Language Code L	.anguage	Code	Language	Code	
Tagalog TAGA Chinese (Cantonese) CHCA V Illocano ILOC Chinese (Mandarin) CHMA F	Braille /ietnamese Portuguese Korean	BRAI VIET PORT KORE	Hindustani Japanese Russian	HNDU JAPN RUSS	
5. LANGUAGE USED 7. TENURE		TIME BASE			
VERBAL WRITTEN PERMANENT LIN B. WAS THIS THE FIRST TIME EMPLOYEE PARTICIPATED IN TI	MITED TERM L	FULL TIME DATE EMPLOYEE F	PART TIME FIRST ASSUMED BILIN		ING BSP*
STATE FLUENCY EXAMINATION YES NO (If NO, enter date first exam taken)		CRITERIA (10% of v	vork time)		
11. REASON FOR REQUEST ENTER OLD CLASS	ΔΙ	RE BILINGHAL DUTIE	S SUBSTANTIALLY TH	E SAME?	
RECLASSIFICATION (If employee is already receiving bilingual pay and has a change in classification, complete Itens 1 through 16. J.)	[O (If NO, explain in Iter		
NEW POSITION FOR WHICH BILINGUAL PAY HAS NEVER BEEN REQUESTED. (Complete all Items 1	. through 16.J.)				
ENTER LAST INCUMBENT			S SUBSTANTIALLY TH D BY THE LAST INCUM		
REFILLING VACANT POSITION FOR WHICH BILINGUAL PAY WAS PREVIOUSLY APPROVED.			O (If NO, explain in Itel		
D. TERMINATE BILINGUAL PAY—EMPLOYEE CEASED TO MEET BSP* CRITERIA OR VACATED THE PO	OSITION. (Complet	e all Items 1. through 8	3. and 14.)		
E. REMOVE THIS POSITION FROM BILINGUAL PAY STATUS—CLIENTELE OF THIS LOCATION LOWER	ED TO THE DEGR	EE THAT BSP* CRITE	RIA CANNOT BE MET.	(Complete Items 1, through 8., 12., and	
ESTABLISH BILINGUAL PAY—CHANGE IN INCUMBENT'S DUTIES OR CASE LOAD. (Complete Items	1. through 15.J.)				
12. WORK ADDRESS OF EMPLOYEE				0.10017011000	· (T
A. EXACT OFFICE OR UNIT TITLE AND DISTRICT IN WHICH EMPLOYEE WORKS				C. LOCATION CODE completed by the mental bilingual pa	depart-
3. ADDRESS (List Street Address, City and Zip Code) WHERE EMPLOYEE WORKS				dinator)	.,
13. EMPLOYEE AND SUPERVISOR SIGNATURES (The undersigned certify that the information contained in this d		· · · · · · · · · · · · · · · · · · ·			
A. EMPLOYEE	B. TELEPHON	E NUMBER	C. DATE SIGNED		
्रें). IMMEDIATE SUPERVISOR	E. TELEPHON	E NUMBER	F. DATE SIGNED		
4. AGENCY APPROVAL A. BILINGUAL COORDINATOR	B. TELEPHON	E NUMBER	C. DATE SIGNED		

*BSP - Bilingual Salary Program

(CONTINUE ON REVERSE)

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15.A. EMPLOYEE DUTIES (Provide a brief desc	cription of employee's duties perta	aining to bilingual skills.)			
B. WHAT PERCENT OF EMPLOYEE'S WORK			<u> </u>		
16.A. GIVE A BRIEF DESCRIPTION OF THE PR	ROGRAM OR OFFICE IN WHICH	THIS EMPLOYEE WORK	S		
			O TOTAL NUMBER OF	OLIENTO OEDVED DV. VO	LID OFFICE
B. NUMBER OF CLIENTS USING THE LANGU/ YOUR OFFICE	AGE OF THIS EMPLOYEE WHO	ARE SERVED BY	C. TOTAL NUMBER OF	CLIENTS SERVED BY YO	UR OFFICE
050	CAUC NAO VE	0)			
PER	(WK, MO. YF			PER	(WK, MO. YR)
D. NUMBER OF CLIENTS USING THE LANGUATHIS EMPLOYEE			E. TOTAL NUMBER OF	PER PER	• • • • • • • • • • • • • • • • • • • •
D. NUMBER OF CLIENTS USING THE LANGUATHIS EMPLOYEE	AGE OF THIS EMPLOYEE WHO	ARE SERVED BY	E. TOTAL NUMBER OF	CLIENTS SERVED BY TH	IS EMPLOYEE
D. NUMBER OF CLIENTS USING THE LANGUATHIS EMPLOYEE	AGE OF THIS EMPLOYEE WHO A	ARE SERVED BY		PER	S EMPLOYEE (WK, MO. YR)
D. NUMBER OF CLIENTS USING THE LANGUATHIS EMPLOYEE	AGE OF THIS EMPLOYEE WHO AGE OF THIS EMPLOYEE	ARE SERVED BY		PER H. TOTAL NUMBER OF SAME BILINGUAL LA	IS EMPLOYEE
D. NUMBER OF CLIENTS USING THE LANGUATHIS EMPLOYEE PER F. WHAT IS THE TOTAL POPULATION OF PER	AGE OF THIS EMPLOYEE WHO AGE OF THIS EMPLOYEE	ARE SERVED BY R) G. TOTAL NUMBER OF		PER H. TOTAL NUMBER OF	(WK, MO. YR) EMPLOYEES IN THIS OFFICE USING
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